

DT12 Rec'd PCT/PTO 0.1 APR 2004

PATENT

Attorney Docket No. A-67616-2/RMS/DCF/NHT (469249-226)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

STUELPNAGEL, *et al.*

Serial No. 09/636,387

Filed: August 9, 2000

For: *Automated Information
Processing in Randomly
Ordered Arrays*

Group No. 1634

Examiner: Forman, Betty J.

EXPRESS MAIL NO. EV 298967428 US

Transmittal

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

RECEIVED
27 MAY 2004
Legal Staff
International Division

Sir:

The applicant submits the following:

- 1) Response to Office Action
- 2) Petition for Extension of Time
- 3) Check for the amount of \$55.00
- 4) Return Post Card

The Commissioner is authorized to charge any additional fees including extension fees, or other relief that may be required, or credit any overpayment to Deposit Account No. 50-2319 (A-67616-2/RMS/DCF/NHT (469249-226))

Dated: April 1, 2004

Four Embarcadero Center, Suite 3400
San Francisco, CA 94111-4187
Telephone: (415) 781-1989

Respectfully submitted,
DORSEY & WHITNEY LLP

David C. Foster
David C. Foster, Reg. No. 44,685
for
Robin M. Silva, Reg. No. 38,304
Filed under 37 C.F.R. § 1.34(a)



EXPRESS MAIL

UNITED STATES POSTAL SERVICE®



EXPRESS MAIL

UNITED STATES POSTAL SERVICE®
CORPORATE ACCOUNT

POSTAGE AND FEES PAID

Label 108
May 2002

WWW.USPS.COM

FINANCE ST
APR 01

HOW



*E V 2 9 8 9 6 7 4 2 8 U S *

Addressee Copy
Label 11-F June 2002



EXPRESS MAIL

UNITED STATES POSTAL SERVICE®

Post Office To Addressee

ORIGIN (POSTAL USE ONLY)			
PO ZIP Code	Day of Delivery	Flat Rate Envelope	
	<input type="checkbox"/> Next <input type="checkbox"/> Second	<input type="checkbox"/> Postage	
Date In		Postage	
Mo. Day Year	<input type="checkbox"/> 12 Noon <input type="checkbox"/> 3 PM	Return Receipt Fee	
Time In			
<input type="checkbox"/> AM <input type="checkbox"/> PM	Military		
Weight	<input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	COD Fee	Insurance Fee
	Intl Alpha Country Code		
No Delivery	Acceptance Clerk Initials	Total Postage & Fees	
<input type="checkbox"/> Weekend <input type="checkbox"/> Holiday		\$ 13.65	
CUSTOMER USE ONLY			
METHOD OF PAYMENT:			
Express Mail Corporate Acct. No.			

DELIVERY (POSTAL USE ONLY)			
Delivery Attempt	Time	Employee Signature	
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM		
Delivery Attempt	Time	Employee Signature	
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM		
Delivery Date	Time	Employee Signature	
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM		
<input type="checkbox"/> WAGER OF SIGNATURE (Waiver Only) Addressee's signature is required for delivery to be made without delivery receipt or waiver of signature is required. (With delivery to be made without delivery receipt, addressee's signature is required to secure addressee or addressee's agent (if delivery employee judges that addressee is not in secure location) and I authorize that delivery employee's signature constitute valid proof of delivery.			
NO DELIVERY <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday			
Customer Signature			
Federal Agency Acct. No. or Postal Service Acct. No.			

FROM: (PLEASE PRINT)

425 781 71984

PHONE

425 781 71984

URS & WHITNEY LLP

4 EMBARCADERO CTR STE 3400

SAN FRANCISCO CA 94111-4167

A-610114-2

TO: (PLEASE PRINT)

MAIL CENTER FOR PATENTS

COMM-FAC 1400

USPTO MAIL ROOM

WASHINGTON DC 20540

APR 01 2004

MAIL LABEL DATE IN

MAIL DATE CANCELED

APR 03 2004

EXPRESS MAIL DATE IN

box

PRESS HARD.
You are making 3 copies.

FOR PICKUP OR TRACKING CALL 1-800-222-8844

www.usps.com

only

The e
the Exp